



MA Prescription Monitoring Program County-Level Data Measures (Calendar Year 2015)

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The Department of Public Health's (DPH) Prescription Drug Monitoring Program (PMP) serves as a repository of data for all prescription drugs dispensed statewide, including those prescriptions that represent the highest potential for abuse (federal Schedules II – V, including certain narcotics, stimulants and sedatives) and are among those most sought for illicit and non-medical use. The PMP also enables prescribers and dispensers to access a patient's prescription history and can be used as a clinical decision-making tool, allowing the provider to have a holistic view of the patient's medications.

When interpreting PMP county-level data, it is important to emphasize that increases or decreases in a single measure may not indicate an increase or decrease in prescription misuse or abuse. Put simply, use does not always equate to abuse. There are many factors that might explain an unusually high rate of prescribing in a given area. For instance, an area which contains a large number of residents in long-term care facilities may cause a high rate of opioid prescribing.

These datasets inform critical discussions about opioid prescribing, provide an important baseline to better inform future policy decisions and allow the state and stakeholders to more meaningfully measure whether policy initiatives are effective.

Effective October 6, 2014, all hydrocodone combination drug (HCD) products (e.g., vicodin) were reclassified from Schedule III to Schedule II. This reclassification during the last quarter of 2014 makes comparisons over time difficult to interpret. To ensure comparability with reports from previous years, the county-level measures presented in CY 2014 have excluded all HCD prescriptions rescheduled from III to II on and after October 6, 2014. Had they been included for all of CY 2014, that report would have shown an "artificial" increase of approximately 25% in the number of individuals who meet the "activity of concern" threshold while an "apples to apples" comparison shows a decrease of about 6.5% for this measure from CY 2013 to 2014.

Beginning with CY 2015 data, reports of Schedule II products will include all HCD prescriptions. The increase in "activity of concern" during CY 2015 is attributed to the rescheduling of hydrocodone combination drug products from Schedule III to II. Future trend reports summarizing opioid data after CY 2011 (when MA PMP began monitoring for Schedules III-V) will include all opioid drug products in Schedule III, allowing for "apples to apples" comparisons over time.
